

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ST		09-25-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	CTH	744	10-22-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	Original
1	✓
2	✓
3	✓
4	✓
5	0 0 ✓
6	✓ ✓ ✓
7	0 0 ✓
8	✓ 0 ✓
9	✓ ✓ ✓
10	✓ ✓ ✓
11	✓ ✓ ✓
12	✓ ✓ ✓
13	✓ ✓ ✓
14	✓
15	✓
16	✓
17	0 0 ✓
18	✓ ✓ ✓
19	0 0 ✓
20	0 0 ✓
21	✓
22	✓
23	✓
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Claim	Date
Final	Original
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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10-859
10/23